FORM

Form Approved. OMB No. 2040-0086.

I. EPA I.D. NUMBER

1	<b>\$EPA</b>		GENERAL INFORMATION  Consolidated Permits Program  F						T/A C	
GENERAL						ore starting.)	1 2		13	14 15
LABE	LITEMS						GENERAL INSTRU			cit in the
I. EPA I.D. NUMBER							designated space. Review the inform is incorrect, cross through it and en appropriate fill-in area below. Also, if	nation c iter the	carefully correct	r, if any of it data in the
III. FACILITY NAME PLEASE			is absent (the area to to a specific the area in the specific that should as					ase prov	vide Ít ir	the proper
V. FACILITY MAILING ADDRESS			fill-in area(s) below. If the labe need not complete items [, III, must be completed regardless)					and VI ( mplete a	<i>(except</i> all items	VI-B which s if no label
VI. FACILITY LOCATION							has been provided. Refer to the insidescriptions and for the legal authorities data is collected.			
1, 4837 14 1 13	T CHARACTERIST	1CS	9 1 1 1	11.	regress in emigraph	Constitution of the Administration	data is conected,			
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of <b>bold-faced terms</b> .										
	SPECIFIC QU	ESTIONS	YES	Mar NO	FORM ATTACHED	SPECIFIC	QUESTIONS	YES	Mark NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)			×		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a		19	X		
C le this a fa	cility which current	ly results in discharges to	16	17	18	discharge to waters of the U.S.? (FORM 2B)  D. Is this a proposed facility (other than those described in A			20	21
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)			X 22	23	24		sult in a discharge to waters of	25	28	27
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)				X		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore,			X	41
C. Do you or y	will you inject at this	facility any produced water	28	29	3/0	underground sources of d		31	32	33
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons?				×		processes such as mining	t at this facility fluids for special g of sulfur by the Frasch process, als, in situ combustion of fossil ermal energy? (FORM 4)		×	
(FORM 4)	ty a proposed efet	ionany source which is one	34	35	36	Lie this facility a propose	ed etationary course which is	37	38	39
<ol> <li>Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)</li> </ol>			40	41	42	J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area?			*	45
( )						(FORM 5)				
NAME OF FACILITY  SKIP Midtown Tunnel/Downtown Tunnel/MLK Extension Project										
15 16 - 29 30								69		
IV. FACILITY	CONTACT	A. NAME & TITLE (last	finet	L. ciela			B. PHONE (area code & no.)	433		
o T	Carriaga						(757) 673-9430			
2 Agnese	e, Carissa	Environmental	Ma.	nage	= T			55		
	AILING ADDRESS									
		A. STREET OR P.	.O. BC	Х	, , ,					
3 PO Box	c 7489		l I	1 1	- I I I	45				
		B. CITY OR TOWN				C. STATE	D. ZIP CODE			
Ports	nouth		l			VA 2	3707			
VI. FACILITY	LOCATION					40 41 42 47	51   图   图   图   图   图   图   图   图   图			
		EET, ROUTE NO. OR OTHE	R SP	ECIFIC	DENTIFIE	ER .				
5 1500 Seaboard Ave.										
B. COUNTY NAME										
Portsmo	uth		ı T	ł			70			
		C. CITY OR TOWN				D. STATE	E. ZIP CODE F. COUNTY C	ODE (	if knov	'n)
6 Ports	houth ' '		-	1	1 I I	40 41 42 47	3707	-54		

U.S. ENVIRONMENTAL PROTECTION AGENCY

CONTINUED FROM THE FRONT	CONTINUED FROM THE FRONT									
VII. SIC CODES (4-digit, in order of priority)	2.050049									
A. FIRST	B, SECOND									
(specify)   7 1622   (specify)   Bridge, Tunnel, and Elevated Highway Construction	$\frac{c}{7}$ (specify)									
15 16 19	15 16 - 19									
C. THIRD	D. FOURTH									
C (specify)	c       (specify)									
7										
15 16 · 19	15   16   -									
VIII. OPERATOR INFORMATION A. NAI	ME B.Is the name listed in Item									
C	VIII-A also the owner?									
8 SKW Constructors										
15 16	55 88									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box: if "Other," specify.)  D. PHONE (area code & no.)										
F = FEDERAL M = PUBLIC (other than federal or state) P (757) 673-9400										
S = SIAIE O = OTHER (specify)										
P = PRIVATE   15  6 - 18   19 - 21   22 - 26										
E. STREET OR P.O. BOX										
1500 Seaboard Avenue										
26 55										
F, CITY OR TOWN	G. STATE   H. ZIP CODE   IX. INDIAN LAND									
	Is the facility located on Indian lands?									
B Portsmouth	VA   23707 □ YES ☑ NO									
15 16	40 41 42 47 51 52									
X. EXISTING ENVIRONMENTAL PERMITS										
	PSD (Air Emissions from Proposed Sources)									
C T   C T	T 3D (All Elissions from Proposed Bourbes)									
9 N 9 P										
15 16 17 18 30 15 16 17	18 30   E. OTHER (specify)									
B. UIC (Underground Injection of Fluids)										
9 U	JPA 2011-1116 (specify)									
15 16 17 18 30 15 16 17	18 30									
C. RCRA (Hazardous Wastes)	E. OTHER (specify)									
C T	(specify)									
9 R VAR000524918 9	VSMP									
15 16 17 18 30 15 16 17	16 30   									
XI. MAP										
	at least one mile beyond property boundaries. The map must show the outline of the facility, the									
injects fluids underground. Include all springs, rivers, and other surface v	tures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it									
	later bodies in the map area, eee moradons for precise requirements.									
XII. NATURE OF BUSINESS (provide a brief description)										
The Downtown Tunnel/Midtown Tunnel/MLK Extension	Project is comprised of a new two-lane tunnel under the									
	n Tunnel; maintenance and safety improvements to the exisiting									
Midtown Tunnel; modifications to the interchang	e at Brambleton Avenue/Hampton Boulevard in Norfolk; maintenance									
and safety improvements to the existing Downtow	Tunnels; and extension of the MLK Expressway from London									
Boulevard to Interstate 264, with an interchang	at High Street.									
WILL DEDITIES OF TICKLES										
XIII. CERTIFICATION (see instructions)										
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my										
	mation contained in the application, I believe that the information is true, accurate, and complete. I									
am aware that there are significant penalties for submitting false informa-	tion, including the possibility of fine and imprisonment.									
A. NAME & OFFICIAL TITLE (type or print)  B.	SIGNATURE C. DATE SIGNED									
	11001									
Wade Watson, Project Director	10/2/st.									
	/w/ h/26/12									
COMMENTS FOR OFFICIAL USE ONLY										
D D D D D D D D D D D D D D D D D D D										
	<b>l</b>									